P170000 19671

(Requestor's Name)			
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(Document Number)			
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	RATION: A/C Service Doral	, Inc		
DOCUMENT NUM	D17000010671			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Roman Rodriguez			
		Name of Contact P	erson	
	A/C Service Doral, Inc			
		Firm/ Compan	y	
	6921 NW 82nd Ave			
		Address		
	Miami, FL 33166		_	
		City/ State and Zip	Code	
info(@servicedoral.com			
<u> </u>	E-mail address: (to be us	sed for future annual ro	port notification)	
For further information	on concerning this matter, pleas	se call:		ૢ૽ૼ૽
Roman Rodriguez		at (317 - 3972	
Name	of Contact Person		a Code & Daytime Telephone Number	-
Enclosed is a check for	or the following amount made	payable to the Florida	Department of State:	3 · · ·
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certificate of Status	08 15: 98
	iling Address endment Section		reet Address nendment Section	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to

Articles of Incorporation

nΓ

A/C Service Doral	Inc	
	ntly filed with the Florida Dept. of State)	
17000019671		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation name mu.	abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addr		· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent		
Name of New Registered Agent		_ 98
	street address)	- 5 強
	an eer taan easy	96 J.E.
New Registered Office Address:	(City) Florida (Zi	ip Code)
		,,
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		7.
Signature of Nev	w Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Yusnier Tuero	6921 NW 82nd Ave
Add			Miami, FL 33166
X Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	
Add			<u></u>
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

E. <u>If amending</u> (Attach <i>additi</i>	or adding additional Artional sheets, if necessary).	ticles, enter chang (Be specific)	e(s) here:		
N/A	••				
			- · ·	 _	
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				<u>.</u>	
					
					
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		-			
		···· - · - · · · · · · · · · · · · · ·			
				<u>.</u>	
F. If an amend	ment provides for an exc	hange, reclassifica	tion, or cancellat	ion of issued shar	es,
provisions to	for implementing the amupplicable, indicate N/A)	endment if not cor	<u>itained in the am</u>	endment itself:	
N/A		_			
		-			
				·	
	-				
				-	
.					
					•

	_, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will need document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
June 20th. 2019 Dated	
Signature	_
(By a director, president or other officer = if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Roman Rodriguez	
(Typed or printed name of person signing)	
President	

(Title of person signing)